

went on to graduate school at Princeton University. She became the first African American woman to earn a Ph.D. in psychology from Princeton in 1976, where she studied the psychology of learning. Dr. Cross now serves in the AFT's Human Rights and Community Relations Department where she does research, member education, advocacy, and coalition-building on civil and human rights issues.

It is clear that the efforts of Dr. Cross and her colleagues paid off, as the E-Rate program has become a \$10 billion investment in our schools and libraries. Although the battles for the E-Rate program are by no means over, we stop to take a moment to recognize Mary M. Cross as a tireless Champion for Education and Technology. Dr. Cross is a Point-of-Light for all Americans.

#### PERSONAL EXPLANATION

### HON. JOHN LINDER

OF GEORGIA

IN THE HOUSE OF REPRESENTATIVES

Thursday, September 22, 2005

Mr. LINDER. Mr. Speaker, I was unable to cast rollcall votes 478, 479, and 480 on September 21, 2005, because I was unavoidably detained on official business. Had I been present I would have cast the following votes: on rollcall No. 478, I would have voted "aye"; on rollcall No. 479, I would have voted "aye"; on rollcall No. 480, I would have voted "aye".

#### FREEDOM FOR RAFAEL MILLET LEYVA

### HON. LINCOLN DIAZ-BALART

OF FLORIDA

IN THE HOUSE OF REPRESENTATIVES

Thursday, September 22, 2005

Mr. LINCOLN DIAZ BALART of Florida. Mr. Speaker, I rise today to speak about Rafael Millet Leyva, a political prisoner in totalitarian Cuba.

Mr. Millet Leyva is President of the Martin Luther King Civic Resistance Movement. He believes in freedom, democracy, human rights and the rule of law. As a peaceful opponent of the tyrannical regime in Havana he has been the subject of constant abuse and harassment.

According to Amnesty International, in December 2001, Mr. Millet Leyva was pushed into a police vehicle and beaten and subsequently dumped in a remote area, after attempting to participate in an event celebrating the Universal Declaration of Human Rights. Amnesty International also reports that he was again detained by the dictatorship in June, 2002.

Despite being the constant target of abuse by the regime, Mr. Millet Leyva continued to demand liberty for the men and women of Cuba. Unfortunately, in March 2003, as part of the tyrant's heinous island wide crackdown on peaceful, pro-democracy activists, Mr. Millet Leyva was arrested by the regime. For over 2 years, he has languished in a grotesque gulag awaiting a sham trial.

His wife reports, "The inhumane conditions my husband has been subjected to have not changed his convictions or his ideals." The courageous life of Mr. Millet Leyva is a won-

derful example of the heroism of the Cuban people. No matter how vile the repression, no matter how brutal the consequences of a dignified struggle for liberty, the totalitarian gulags are full of men and women of all backgrounds and ages who represent the best of the Cuban nation.

Mr. Speaker, it remains categorically unacceptable that men and women who demand freedom from tyranny are locked in the dungeons of monsters. We must continue to stand up and demand the liberation of all who suffer in the darkness of totalitarian rule. As we exercise our democratic rights, let us never forget those who are struggling to liberate the oppressed. My Colleagues, we must demand the immediate and unconditional release of Rafael Millet Leyva and every prisoner of conscience in totalitarian Cuba.

#### CELEBRATING THE BIRTH OF ROHAN KAPIL SHARMA

### HON. JOE WILSON

OF SOUTH CAROLINA

IN THE HOUSE OF REPRESENTATIVES

Thursday, September 22, 2005

Mr. WILSON of South Carolina. Mr. Speaker, today, I am happy to congratulate Persis and Kapil Sharma of Alexandria, Virginia, on the birth of their new baby boy. Rohan Kapil Sharma was born on September 15, 2005, at 12:50 a.m., weighing 6 pounds, 3 ounces and measuring 19 inches long. Rohan has been born into a loving home, where he will be raised by parents who are devoted to his well-being and bright future. His birth is a blessing. As a fellow graduate of Washington and Lee University I am particularly happy for the Kap Sharma family.

#### CHASE WILLIAM CUNNINGHAM MAKES HIS MARK ON THE WORLD

### HON. BOB ETHERIDGE

OF NORTH CAROLINA

IN THE HOUSE OF REPRESENTATIVES

Thursday, September 22, 2005

Mr. ETHERIDGE. Mr. Speaker, I rise today to congratulate Mr. Dan Cunningham and Ms. Jennifer Eberhardt both formerly members of my staff, now married and living in Wisconsin, on the birth of their first child, Master Chase William Cunningham. Chase was born on Thursday, September 15, 2005, and weighed 6 pounds and 11 ounces. My wife, Faye, joins me in wishing Dan and Jennifer great happiness during this very special time in their lives.

As a father and now as a grandfather, I know the joy, pride, and excitement that parents experience upon the entrance of their child into the world. Representing hope, goodness, and innocence, a newborn allows those around him to see the world through his eyes . . . as a new, fresh place with unending possibilities for the future. Through a child, one is able to recognize and appreciate the full potential of the human race. I know that Dan and Jennifer look forward to the changes and challenges that their new son will bring to their lives while taking pleasure in the many rewards they are sure to receive as they watch him grow.

I welcome young Chase into the world and wish Dan and Jennifer all the best as they raise him.

#### THE MEDICARE INFORMED CHOICE ACT: A FIRST STEP IN PROTECTING MEDICARE BENEFICIARIES

### HON. JANICE D. SCHAKOWSKY

OF ILLINOIS

IN THE HOUSE OF REPRESENTATIVES

Thursday, September 22, 2005

Ms. SCHAKOWSKY. Mr. Speaker, I am pleased to join my colleague, Representative PETE STARK, in introducing the Medicare Informed Choice Act, an immediate and essential first-step in protecting Medicare beneficiaries.

I believe that fundamental changes are needed to make the new Medicare drug benefit more affordable and less complicated. Along with my colleagues Representative MARION BERRY and BOB ANDREWS, I have introduced H.R. 752, the Medicare Prescription Drug Savings and Choice Act, which would establish a meaningful drug benefit in Medicare and require Medicare to negotiate for price discounts, as the VA and large employers do today. In the meantime, however, it is clear that Medicare's 42 million beneficiaries need immediate relief from the confusion and complexity of this fall's enrollment process. The Medicare Informed Choice Act would provide that relief by providing three simple changes in 2006: elimination of the late enrollment fee, a one-time opportunity for every beneficiary to switch plans, and protection against the loss of retiree health benefits.

I recently received a letter from a constituent, Phyllis Arist from Evanston, Illinois. She wrote:

I urge you to suspend the late-enrollment penalty for Medicare Part D.

Enrollment in Part D will be a challenge for anybody and everybody, whether that person is health care savvy or not. There will be dozens of complex plans that consumers will have to confront. How would you choose among a slew of different drug plans, each covering different drugs, using their own cost-sharing scheme, working with different pharmacy networks, and no guarantee that the plan will be around next year?

If Medicare Part D were a straight-forward benefit like Medicare Part B, the penalty might be justified. But given the circumstances, it is unfair. People with Medicare need more time to understand the new Medicare drug benefit. More time, combined with reliable and comprehensive information, will ensure more people are making the right choices and not taking a leap of faith into the unknown.

I agree with Ms. Arist. It is abundantly clear that the enrollment process for the new Medicare drug benefit is complicated, confusing and can result in bad decisions by beneficiaries. Any of us who have tried to explain the basic benefit to our constituents knows how difficult it is to do so, let alone explain the variations in the multiple private plans that will be available to senior citizens and persons with disabilities. Private plans will vary in terms of premiums, cost-sharing requirements, covered drugs, and pharmacy sources. Beneficiaries taking multiple medications will find it difficult to sort out their options, especially in areas like Chicago where about 50 plans are expected to be available.

No one who is on the ground believes that the support and outreach services will be available to provide the one-on-one counseling